PART B - FEE(S) TRANSMITTAL

MAY 1	Ptos farm, together wit	, , ,	Commissioner f P.O. Box 1450 Alexandria, Vir Fax (571)-273-2885	or Patents ginia 22313-1450	
INSTRUCTIONS: This for appropriate. All verther co-indicated unless collected	orm should be used for transformesponding the Pa belocked directed otherwise in	nitting the ISSUE FEE and tent, advance orders and noti 1 Block 1, by (a) specifying	PUBLICATION FEE (if req fication of maintenance fees a new correspondence addres	uired). Blocks 1 through 5 s will be mailed to the current is; and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for
	CE ADDRESS (Note: Use Block 1 for an		Note: A certificate of Fee(s) Transmittal. T	f mailing can only be used for his certificate cannot be used that hal paper, such as an assignment to of mailing or transmission.	or domestic mailings of the for any other accompanying
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05/11/2006 CCHAU2 00	0000020 09829263		Steven	1. autois	(Depositor's name)
01 FC:2501	700.00 OP		ft.	delois	(Signature)
02 FC:1504	300.00 OP		May 8 19	2004	(Date)
APPLICATION NO.	FILING DATE	FIRST NAME	DINVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	NTERACTIVE CONTENT GU			T 20074 20076 2007	DATE DUE
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	
nonprovisional	we yes	\$1400 700	\$300	\$1700 1000	08/04/2006
EXAMINER SAX, STEVEN PAUL		ART UNIT	715-802000	J	
CFR 1.363). Change of correspon Address form PTO/SB/1	ce address or indication of "Fee dence address (or Change of Co (22) attached. ation (or "Fee Address" Indicati or more recent) attached. Use o	on form- on form- of a Customer (1) the name or agents (2) the name registered 2 registered	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		
3. ASSIGNEE NAME AND PLEASE NOTE: Unles recordation as set forth i (A) NAME OF ASSIGN HILLOUST LAKE	D RESIDENCE DATA TO BE s an assignee is identified belon 37 CFR 3.11. Completion of NEE OCATORIES, Loc e assignee category or categoric	ow, no assignee data will app this form is NOT a substitute (B) RESIDE	ear on the patent. If an assig for filing an assignment. NCE: (CITY and STATE OR ROCKVILLE	COUNTRY)	
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a. Applicant claims S	s (from status indicated above) SMALL ENTITY status. See 37 Its requested to apply the Issue Publication Fee (if required) will cords of the United States Parel			ALL ENTITY status. See 37 C sly paid issue fee to the applica gistered attorney or agent; or the	
Authorized Signature Typed or printed name _	TU di	Bois	Date	Jay 8, 2006	
This collection of informati an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	on is required by 37 CFR 1.311 lity is governed by 35 U.S.C. 1 pplication form to the USPTO is for reducing this burden, sho ginia 22313-1450. DO NOT SI-1450.	. The information is required 22 and 37 CFR 1.14. This col Time will vary depending upuld be sent to the Chief Information of the Chief Information is required to the Chief Information is requi	to obtain or retain a benefit by lection is estimated to take 12 oon the individual case. Any of nation Officer, U.S. Patent an D FORMS TO THIS ADDRES	the public which is to file (and minutes to complete, including comments on the amount of tight demark Office, U.S. Deposs. SEND TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,

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